

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**

SERIAL NO. 10816022

FILING DATE 03-31-09

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2		1				
3		1				
4		1				
5		1				
6		1				
7		6				
8		6				
9		6				
10		6				
11		6				
12		6				
13		6				
14		1				
15		1				
16		1				
17		1				
18		1				
19		1				
20		1				
21		6				
22	1					
23		1				
24		1				
25		1				
26		1				
27		1				
28		6				
29		6				
30		6				
31		6				
32		6				
33		6				
34		6				
35		1				
36		1				
37		1				
38		1				
39		1				
40		1				
41		1				
42		6				
43	1					
44		1				
45		1				
46		3				
47		3				
48		3				
49		3				
50		3				
TOTAL IND.	4					
TOTAL DEP.		220				
TOTAL CLAIMS	224					

	IND	DEP	IND	DEP	IND	DEP
51		3				
52		3				
53		3				
54		3				
55		3				
56		3				
57		3				
58		3				
59		3				
60		3				
61		3				
62	1					
63		1				
64		1				
65		3				
66		3				
67		3				
68		3				
69		3				
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86						
87						
88						
89						
90						
91						
92						
93						
94						
95						
96						
97						
98						
99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

21  
43  
52  
83